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7590

03/03/2004

Robert E. Bushnell
 Suite 300
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 Washington, DC 20005



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(Depositor's name)
(Signature)
(Date)

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
09/836,550	04/18/2001	Deok-Hyeon Choe	P56342	6795

TITLE OF INVENTION: TENSION MASK FOR COLOR CRT, METHOD FOR MANUFACTURING THE TENSION MASK, AND EXPOSURE MASK USED IN THE MANUFACTURE OF THE TENSION MASK

APPLN. TYPE	SMALL ENTITY	ISSUE FEE	PUBLICATION FEE	TOTAL FEE(S) DUE	DATE DUE
nonprovisional	NO	\$1330	\$300	\$1630	06/03/2004

EXAMINER	ART UNIT	CLASS-SUBCLASS
PATEL, ASHOK	2879	313-403000

1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).

- ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached.
- ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.

2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1 Robert E. Bushnell, Esq.

2

3

3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)

PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

SAMSUNG SDI CO., LTD.

Suwon-si, Gyeonggi-do, Republic of Korea

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

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(Authorized Signature)

(Date)

Robert E. Bushnell, Esq., 27,774

6/2/04

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This collection of information is required by 37 CFR 1.311. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, Alexandria, Virginia 22313-1450.

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06/04/2004 HAL122 00000044 09836550

01 FC:1501

1330.00 OP

02 FC:1504

300.00 OP

TRANSMIT THIS FORM WITH FEE(S)



PATENT
P56342

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re Application of:

DEOK-HYEON CHOE et al.

Serial No.: 09/836,550

Examiner: PATEL, ASHOK

Filed: 18 April 2001

Art Unit: 2879

For: TENSION MASK FOR COLOR CRT, METHOD FOR MANUFACTURING THE
TENSION MASK, AND EXPOSURE MASK USED IN THE MANUFACTURE
OF THE TENSION MASK

ISSUE FEE AND PUBLICATION FEE TRANSMITTAL

Mail Stop : ISSUE FEE

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Sir:

This transmittal accompanies a signed Issue Fee Transmittal, PTOL-85B, and Applicant's check drawn to the order of the Commissioner of Patents & Trademarks in the amount of U.S. \$1,630.00, including a fee of \$300.00 for Publication Fee.

Respectfully submitted,

Robert E. Bushnell, Esq.

Reg. No.: 27,774

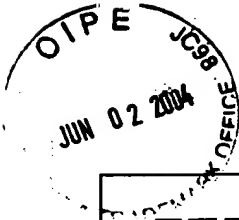
1522 "K" Street, N.W., Suite 300
Washington, D.C. 20005
(202) 408-9040

Enclosures: Issue Fee Transmittal, PTOL-85B, and check # 45674

Folio: P56342

Date: June 2, 2004

REB/sb



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FEE TRANSMITTAL Patent fees are subject to annual revision.		Complete If Known						
		Application Number		09/836,550				
		Filing Date		18 April 2001				
		First Named Inventor		DEOK-HYEON CHOE et al.				
		Examiner Name		PATEL, ASHOK				
		Group/Art Unit		2879				
TOTAL AMOUNT OF PAYMENT		(\$) 1,630.00		Attorney Docket No.		P56342		
METHOD OF PAYMENT (check one)				FEE CALCULATION (continued)				
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge ANY DEFICIENCY to:				3. ADDITIONAL FEES				
Deposit Account Number: <u>02-4943</u>				Large Entity Small Entity				
Deposit Account Number: _____				Fee Code Fee (\$) Fee Code Fee (\$)				
<input type="checkbox"/> Charge Any Additional Fee Required Under 37 C.F.R. §1.16 and 1.17.				Fee Description Fee Paid				
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27				1051 130 2051 65 Surcharge-late filing fee or oath \$				
2. <input checked="" type="checkbox"/> Payment Enclosed: (CHECK #45674)				1052 50 2052 25 Surcharge-late provisional filing fee or cover sheet \$				
<input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> Other				1053 130 1053 130 Non-English specification \$				
FEE CALCULATION				1812 2,520 1812 2,520 For filing a request for reexamination \$				
1. BASIC FILING FEE				1804 920* 1804 920* Requesting publication of SIR prior to Examiner action \$				
Large Entity Small Entity				1805 1,840* 1805 1,840* Requesting publication of SIR after Examiner action \$				
Fee Code Fee (\$) Fee Code Fee (\$)				1251 110 2251 55 Extension for reply within first month \$				
Fee Description Fee Paid				1252 420 2252 210 Extension for reply within second month \$				
1001 770 2001 385 Utility filing fee \$				1253 950 2253 475 Extension for reply within third month \$				
1002 340 2002 170 Design filing fee \$				1254 1,480 2254 740 Extension for reply within fourth month \$				
1003 530 2003 265 Plant filing fee \$				1255 2,010 2255 1,005 Extension for reply within fifth month \$				
1004 770 2004 385 Reissue filing fee \$				1401 330 2401 165 Notice of Appeal \$				
1005 160 2005 80 Provisional filing fee \$				1402 330 2402 165 Filing a brief in support of an appeal \$				
SUBTOTAL (1) (\$)<u>0.00</u>				1403 290 2403 145 Request for oral hearing \$				
2. EXTRA CLAIM FEES				1451 1,510 1451 1,510 Petition to institute a public use proceeding \$				
Total claims -20** = x =				1452 110 2452 55 Petition to revive - unavoidable \$				
Independent Claims -3** = x =				1453 1,330 2453 665 Petition to revive - unintentional \$				
Multiple Dependent =				1501 1,330 2501 665 Utility issue fee (or reissue) \$1,330.00				
** or number previously paid, if greater; For Reissues, see below				1502 480 2502 240 Design issue fee \$				
Large Entity Small Entity				1503 640 2503 320 Plant issue fee \$				
Fee Code Fee (\$) Fee Code Fee (\$)				1460 130 1460 130 Petitions to the Commissioner \$				
Fee Description Fee Paid				1504 300 1504 300 Publication fee for early, voluntary, or normal publication \$ 300.00				
1201 86 2201 43 Independent claims in excess of 3				1806 180 1806 180 Submission of Information Disclosure Statement \$				
1202 18 2202 9 Claims in excess of 20				8021 40 8021 40 Recording each patent assignment per property (Times number of properties) \$				
1203 290 2203 145 Multiple dependent claim, if not paid				1809 770 2809 385 Filing a submission after final rejection (37 C.F.R. §1.129(a)) \$				
1204 86 2204 43 ** Reissue independent claims over original patent				1810 770 2810 385 For each additional invention to be examined (37 C.F.R. §1.129(b)) \$				
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent				1801 770 2801 385 Request for Continued Examination (RCE) \$				
SUBTOTAL (2) (\$)<u>0.00</u>				8001 3 Printed copy of patent w/o color \$				
				Other Fee (specify) _____ \$				
				** Reduced by Basic Filing Fee Paid				
				SUBTOTAL (3) \$1,630.00				
SUBMITTED BY						Complete (if applicable)		
Typed or Printed Name		Robert E. Bushnell, Esq.			Reg. Number		27,774	
Signature				Date		June 2, 2004		
				Deposit Account User ID				

REB/sb

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